BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

·													
		CLAIMS AS	S FILED - PART (Column 1)		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY		
TOTAL CLAIMS			26					RAT	E	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		4	BASIC	FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			20 minus 20=		* Ø			X\$ 9	)=		OR	X\$18=	
INDEPENDENT CLAIMS			)minus 3 =		* 0'			X42	=		OR	X84=	
MULTIPLE DEPENDENT CLAIM P			RESENT					+140	<u>=</u>		OR	+280=	
* If	the difference	in column 1 is	ess than zero, enter "0" in colum			olumn 2		TOTA	۱L	370	OR	TOTAL	
CLAIMS AS AMENDED - PART II							•	CMAI		ENTITY	OR	OTHER SMALL	
_		(Column 1)	1	(Colui		(Columi	n 3)	SIVIA			Un 1	SWALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	BER OUSLY FOR	PRESE	•	RATI	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9	=		OR	X\$18=	
	Independent	*	Minus	***	- 01 4144	=		X42:	=		OR	X84=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	CLAIM	l.	لـــا	+140	=		OR	+280=	
								TO				TOTAL	
		(Column 1)		(Colu	mn 2)	(Colum	n 3)	ADDIT. F	tti		1	addit. Fee	
AMENDMENT B	<i>:</i>	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESE EXTR	NT	RATI	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=			=		OR	X\$18=	
	Independent	*	Minus	***	T OL A154	=		X42:	=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								=	•	OR	+280=	
	TOTAL ADDIT. FEE										OR	TOTAL ADDIT. FEE	
		n 3)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			_							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESE EXTR		RATE	=	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9	=		OR	X\$18=	
	Independent	*	Minus	***		=	$\Box$	X42=	_		OR	X84=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPE				T CLAIM			$\vdash$	$\dashv$				
# If the entry is column 1 is less than the entry is column 2 write "0" in column 2									=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  OR  ADDIT. FEE											TOTAL ADDIT. FEE		
		nhar Provincely Pa						nund in the	anr	ropriate bo	x in col	lumo 1	